

Nutrition Sector Update

OCTOBER 2015

SECTOR OVERVIEW

USAID's Office of U.S. Foreign Disaster Assistance (USAID/OFDA) is a leader in supporting emergency nutrition response in international humanitarian crises. USAID/OFDA-supported programs are community-based and aim to build awareness and capacity to prevent and treat malnutrition. In addition, USAID/OFDA-funded activities support the community management of acute malnutrition (CMAM), infant and young child feeding in emergencies (IYCF-E) programs, and improvement of emergency nutrition information collection and analysis to better inform response efforts. In Fiscal Year (FY) 2015, USAID/OFDA provided nearly \$59.8 million to support nutrition activities, including support for global and regional nutrition initiatives and nutrition interventions in 19 countries.

IMPROVING GLOBAL EMERGENCY NUTRITION RESPONSE CAPACITY

Humanitarian reform has improved country-level emergency nutrition coordination in recent years; however, the humanitarian nutrition community continues to face challenges related to the availability of technical specialists to immediately deploy to support the rapid scale-up of emergency nutrition responses as needed. To address this constraint, USAID/OFDA supported non-governmental organization (NGO) the International Medical Corps (IMC) with \$1 million to build a consortium of surge technical rapid response team (RRT) members that remain on stand-by status to deploy when humanitarian emergencies occur. The IMC-led consortium of technical RRT members includes four categories of expertise: IYCF-E, CMAM, assessment, and social and behavior change. The technical specialists are positioned to deploy to emergencies where the donors, implementing partners, and Global Nutrition Cluster—the global coordinating body for humanitarian nutrition activities, comprising UN agencies, NGOs, and other stakeholders—identify a need for increased technical guidance to support the scale up of the emergency nutrition response.

SAVING LIVES IN SOUTH SUDAN

In December 2013, conflict erupted in South Sudan, generating widespread displacement and exhausting already thin coping mechanisms. The conflict, which remains ongoing despite the late-August signing of a peace agreement, has disproportionately affected women and children. Since December 2013, malnutrition levels among women and children in South Sudan have increased to unprecedented levels. In response to the deteriorating nutrition conditions, USAID/OFDA is prioritizing life-saving interventions to address the needs of malnourished children. In an effort to reach as many children as possible, USAID/OFDA has provided \$5 million to the UN Children's Fund (UNICEF) since the start of the conflict to support the country-level Nutrition Cluster in South Sudan, as well as the delivery of life-saving emergency nutrition supplies, including ready-to-use therapeutic food (RUTF), and has advocated for adjusted admission criteria that may allow more children to receive malnutrition treatment during the May-to-August lean season. As conflict and movement restrictions increasingly prevented humanitarians from reaching those in need, UNICEF and the UN World Food Program (WFP) launched a Rapid Response Mechanism designed to access the hardest-to-reach areas with treatment for acute malnutrition, preventive blanket feeding, immunizations, and general food distributions. This effort has reached more than 154,000 children younger than five years of age, in part through USAID/OFDA support for UNICEF's nutrition interventions.

ASSESSING TREATMENT COVERAGE OF PROGRAMS TACKLING ACUTE MALNUTRITION

Since 2000, the number of countries implementing CMAM programs has increased from four to more than 60 worldwide. As more communities implement the CMAM model, it is critical to understand not only how projects are being implemented on a routine basis, but to estimate overall treatment coverage to understand national and disaggregated trends. In response to the need, USAID/OFDA contributed \$900,000 to support the Coverage Monitoring Network (CMN), a consortium of emergency nutrition NGOs led by Action Contre la Faim/United Kingdom (ACF/UK), to improve the quality of coverage assessments, as well as to bolster the development of global guidance related to acute malnutrition program management assessments. These assessments allow communities, implementing partners, and donors to better understand and address the challenges to reaching more children with CMAM programming. To date, nutrition actors have conducted more than ninety coverage assessments in 24 countries.

IMPROVING ACUTE MALNUTRITION TREATMENT VIA BETTER MONITORING AND SUPPLY MANAGEMENT

In FY 2015, USAID/OFDA also supported NGO World Vision with \$400,000 to improve the quality of care for children experiencing acute malnutrition via the CMAM mobile health (mHealth) project. CMAM program performance indicators typically track data on treatment outcomes—recovery, relapse, default, or death—and the depletion of RUTF stocks. The indicators do not include valuable information such as the cause of the malnourishment or factors leading to supply shortages. Furthermore, CMAM program performance data does not typically move beyond the health center level due to poor or absent information-sharing and record-keeping practices. More detailed CMAM data aggregated at the district- or national-level could better inform programming and enable data-driven solutions. In collaboration with a consortium of other global partners, World Vision began the CMAM mHealth project by developing standard global technical specifications for a CMAM mHealth application. World Vision and the consortium are currently piloting the application in four countries—Chad, Kenya, Mali, and Niger—to improve the quality of and access to CMAM program performance data to help save lives and reduce the percent of malnourished children that experience medical complications.

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